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PATENT
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re the Patent Application of)
BERGER) Art Unit: 3634
Serial No. 10/784,131) Examiner: B. M. JOHNSON
Filed: 02/19/2004) Attorney Docket No.: 16240.M346
Title: MAGNETIC TILT AND RAISE/)
LOWER MECHANISMS FOR A)
VENETIAN BLIND)

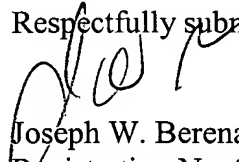
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

SUBMISSION OF POWER OF ATTORNEY

Submitted herewith in connection with the above application is a Revocation of
Power of Attorney with New Power of Attorney and Change of Correspondence Address
that has been signed by Rose M. Murphy.

Respectfully submitted,


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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/784,131
Filing Date	02/19/2004
First Named Inventor	David Berger
Art Unit	3634
Examiner Name	B. M. Johnson
Attorney Docket Number	16240.M346

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

28410

☒ Please change the correspondence address for the above-identified application to:

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OR

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

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Name

Rose M. Murphy

Date

7-25-06

Telephone

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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